



Please type a plus sign (+) inside the box →



#16/Cust # 6/3/03  
2018-265  
PTO/SB/121 (10-00)  
Approved for use through 10/31/2002. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
DBW

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# CORRESPONDENCE ADDRESS INDICATION FORM

## Address to:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Direct all correspondence to:

☒ **Customer Number:** **23117**

Place Customer  
Number Bar  
Label Here →

**OR** *Type Customer Number here*

☐ Request for Customer Number (PTO/SB/125) submitted herewith.

in the following listed application(s) or patent(s):

| Patent Number<br>(if appropriate) | Application Number | Patent Date<br>(if appropriate) | U.S. Filing<br>Date                               |
|-----------------------------------|--------------------|---------------------------------|---|
|                                   | 09/421,086         |                                 | October 19, 1999                                  |
|                                   |                    |                                 | RECEIVED<br>MAY 29 2003<br>TECHNOLOGY CENTER 2800 |

|                          |   |   |
|--------------------------|---|---|
| Typed or<br>Printed Name | Chris Comuntzis   | <b>(check one)</b><br><br><input type="checkbox"/> Applicant or Patentee<br><br><input type="checkbox"/> Assignee of record of the entire<br>interest. Statement under 37 C.F.R. §<br>3.73(b) is enclosed. (Form<br>PTO/SB/96)<br><br><input checked="" type="checkbox"/> Attorney or Agent of record<br><br>31,097<br>(Reg. No.) |
| Signature                |   |   |
| Date                     | May 23, 2003  |   |
| Address of signer:       | 1100 North Glebe Road, 8 <sup>th</sup> Floor<br>Arlington, VA 22202 |   |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.\*

☒ \*Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Assistant Commissioner of Patents, Box CN, Washington, DC 20231.